

State of California—Health and Welfare Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

See Instructions on Back of Page 6
and Front of Page 7

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address Silicon General 11652 Markon, Garden Grove, CA		CIBD017701/12/2013		A. State Manifest Document Number 88614830	
4. Generator's Phone ()				B. State Generator's ID	
5. Transporter 1 Company Name Omega Recovery Services		6. US EPA ID Number ICIAID10141212141510101		C. State Transporter's ID 010384	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone	
9. Designated Facility Name and Site Address Omega Recovery Services 12504 E. Whittier, Whittier, CA 90602		10. US EPA ID Number ICIAID10141212141510101		E. State Transporter's ID	
				F. Transporter's Phone	
				G. State Facility's ID CIBD0142245001	
				H. Facility's Phone (213) 698-0991	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type		13. Total Quantity	14. Unit Wt/Vol
a. Waste Corrosive Liquid N.O.S. Corrosive Liquid UN1760		0-04 D M 01013 1		00166	G
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above	
A. Micro Strip				a. 01 b. c. d.	
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name CORTES CESAR		Signature <i>Cortes Cesar</i>		Month Day Year 07/21/89	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Robert J CIRINGEOM		Signature <i>Robert J Ciringeom</i>		Month Day Year 09/20/89	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name FRANK FORD		Signature <i>Frank Ford</i>		Month Day Year 09/24/89	

DHS 8022 A (1/88)
EPA 8700-22
(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
8907 11 0025 2597 P.O. Box 3000, Sacramento, CA 95812

88614830
IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550